

3761/H
PATENT

Case Docket No. MVMDINC.001CP2

Date: August 20, 2003

Page 1

In re application of : Khairkhahan, et al.
App. No. : 10/033,371
Filed : October 19, 2001
For : METHOD OF IMPLANTING A
DEVICE IN THE LEFT ATRIAL
APPENDAGE (As Amended)
Examiner : Glenn K. Dawson
Art Unit : 3761

I hereby certify that this correspondence and all
marked attachments are being deposited with the
United States Postal Service as first class mail in an
envelope addressed to: Commissioner for Patents,
P.O. Box 1450, Alexandria, VA 22313-1450, on

August 20, 2003

(Date)

Jennifer Hayes, Reg. No. 50,845

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

AUG 27 2003

Sir:

TECHNOLOGY CENTER R3700

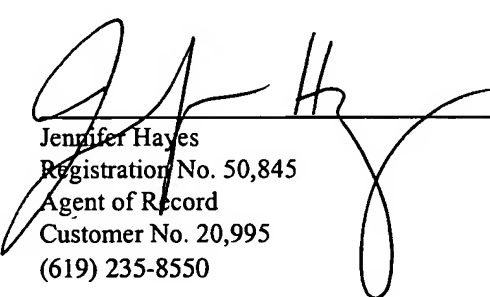
Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

| CLAIMS AS FILED | | | | | | |
|---|---|---|---------------------------------------|------------------|-------|-------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEE |
| Total Claims | 50 | — | 31 | = 19 × | \$ 18 | = \$342 |
| Independent Claims | 7 | — | 7 | = 0 × | \$ 84 | = \$ 0 |
| If application has been amended to contain multiple dependent claim(s), then add | | | | | \$280 | = \$ 0 |
| Fees set forth in 37 C.F.R. § 1.17(p) | | | | | | = \$180 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | | \$522 |

- (X) A Supplemental Information Disclosure Statement.
(X) A Form PTO-1449 listing five (5) references which are enclosed.
(X) Return prepaid postcard.

-
- (X) A check in the amount of \$522 is enclosed.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.
- (X) Please use Customer No. 20,995 for the correspondence address.



Jennifer Hayes
Registration No. 50,845
Agent of Record
Customer No. 20,995
(619) 235-8550